

SECRET
(When Filled In)

VOUCHER NO. 7-12		REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. 7-12											
TO : Finance Division, Accounts Branch THROUGH: Monetary Branch												DIVISION VOUCHER NO. 18 Sept. 64 1121											
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																							
SUBJECT										INVOICE NO(S).													
PAYMENT TO										CONTRACT NO.													
AMOUNT										CHECK TO BE DATED													
CASH PAYMENT		U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK																	
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																							
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$										OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.													
DATE		SIGNATURE OF PAYEE		DATE		SIGNATURE OF AGENT		DATE		SIGNATURE OF RECIPIENT													
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-42 EXPEND CODE		43 F U N D S		44-46 PAY PER. LIQ. CODE		47-52 OBLIG. REF. NO.		53 CA YR		54-57 GENERAL LEDGER ACCT. NO.		58-67 ALLOT. OR COST ACCT. NO.		68-70 DUE DATE		71-80 AMOUNT			
DESCRIPTION-ADVANCE ACCOUNTS 13-27		28-33 T/A NO.		P.O. NO.		PROP. NO.		FY		ADVANCE ACCT. NO.		EMP. NO.		62-67 CK. NO.		X REF. NO.		OBJECT CLASS		DEBIT		CREDIT	
10,357.01 Sylvania Electronic System										500		601.0		61-1202		740		10,357.01				10,357.01	
(Original Addressed to Contract HW-500 (100) - Voucher)																							
DATE		AUTHORIZED CERTIFYING OFFICER		DATE		TOTALS		10,357.01		10,357.01													
18 Sept 64		[Signature]																					

FORM 4-61 1822

SECRET

(1)

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

Use continuation sheet(s) if necessary

VOUCHER NO.

Page 1 of 1

U. S. _____ (Department, bureau, or establishment)

Voucher prepared at _____ (Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Sylvania Electric Products, Inc.
(Payee)

New York 8, New York

(Address)

Contract No. HW-500

Date _____

Req. No.

Date _____

Invoice Rec'd.

Shipped .from

to

Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		<u>Invoice Numbers</u>				
		SES-W-115 (5) (Orig. Inv. Att.)				\$10,345.01
		SES-W-115 (6) " "				12.00
				TOTAL		\$10,357.01

PAYMENT:

(PAYEE MUST **NOT** USE THIS SPACE)

COMPLETE	<input type="checkbox"/>
PARTIAL	<input type="checkbox"/>
FINAL	<input type="checkbox"/>
PROGRESS	<input type="checkbox"/>
ADVANCE	<input type="checkbox"/>

DIFFERENCES

Amount verified; correct for 10,357.01

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

hat
nt.

185

(Date)

(Contracting Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE

MENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per

Title

Cost Reimbursable

Standard Form No. 1034 7 GA 5000 1034-110-02		PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL			
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION <div style="text-align: right; font-size: 1.5em;">SEP 16</div>		DATE VOUCHER PREPARED 10 September 1964		VOUCHER NUMBER SES-W 115 (5)	
		CONTRACT NUMBER AND DATE 38 PM 64		PAID BY	
		REQUISITION NUMBER AND DATE			
PAYEE'S NAME AND ADDRESS Sylvania Electric Products, Inc. P. O. Box 1466 Church Street Station New York, New York 10008		<div style="font-size: 2em; transform: rotate(-45deg); opacity: 0.5;">HW-500</div>		DATE INVOICE RECEIVED	
DISCOUNT TERMS					
PAYEE'S ACCOUNT NUMBER					
GOVERNMENT B/L NUMBER					
SHIPPED FROM		TO		WEIGHT	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE COST PER	AMOUNT (¹)
	8/1/64 to 8/31/64	Costs incurred at Mt. View, August 1964: Direct Labor Overhead 125% Material & Direct Charges Sub Total G & A 5.8% Total Cost TOTAL AMOUNT CLAIMED THIS VOUCHER	1964: \$ 4,067.64 5,084.55 625.70 \$ 9,777.89 567.12 \$10,345.01		\$10,345.01
(Use continuation sheet(s) if necessary) (Payee must NOT use the space below) TOTAL					\$10,345.01
PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE		APPROVED FOR = \$ BY ² TITLE		EXCHANGE RATE = \$ 1.00 DIFFERENCES Amount verified; correct for (Signature or initials)	
Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.					
(Date)		(Authorized Certifying Officer) ²		(Title)	
ACCOUNTING CLASSIFICATION (Appropriation symbol must be shown; other classification optional)					
PAID BY	CHECK NUMBER ON TREASURER OF THE UNITED STATES		CHECK NUMBER ON (Name of bank)		
	CASH DATE		PAYEE ³		
	\$				
¹ When stated in foreign currency, insert name of currency. ² If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title. ³ When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.				PER TITLE	

U.S. GOVERNMENT PRINTING OFFICE: 1963-O-675800

Standard Form No. 1035
7 GAO 5000
1035-107

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

CONTINUATION SHEET

SHEET NO. 2

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT

VOUCHER NUMBER
SES-W 115 (5)

NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT
				COST	PER	
MEMPHIS	8/1/64 to 8/31/64	Costs incurred at SES-W Mt. View month of August, 1964:				
		Direct Labor		\$ 4,067.64		
		Overhead 125%		5,084.55		
		Material		445.12		
		Overtime & Shift Premium		180.58		
		Sub Total		\$ 9,777.89		
		G & A 5.8%		567.12		
		Total Costs		\$10,345.01		
		TOTAL AMOUNT CLAIMED THIS VOUCHER				<u>\$10,345.01</u>

Standard Form No. 1034 7 GAO 5000 1034-110-02		PL C VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL				
U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION			DATE VOUCHER PREPARED 10 September 1964		VOUCHER NUMBER SES-W 115 (6)	
			CONTRACT NUMBER AND DATE		PAID BY	
			REQUISITION NUMBER AND DATE			
PAYEE'S NAME AND ADDRESS Sylvania Electric Products, Inc. P. O. Box 1466 Church Street Station New York, New York 10008			<i>HW-500</i>		DATE INVOICE RECEIVED	
					DISCOUNT TERMS	
					PAYEE'S ACCOUNT NUMBER	
					GOVERNMENT B/L NUMBER	
SHIPPED FROM			TO		WEIGHT	
NUMBER AND DATE OF ORDER	DATE OF DELIVERY OR SERVICE	ARTICLES OR SERVICES <i>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)</i>	QUANTITY	UNIT PRICE COST PER		AMOUNT (1)
	8/1/64 to 8/31/64	Fee Billable month of August, 1964:				
		AUTHORIZED CONTRACT COST		\$97,000.00		
		AUTHORIZED CONTRACT FEE		8,250.00		
		COSTS BILLED TO DATE (PV 1-5)		92,659.25		
		PERCENTAGE OF COMPLETION 95.5%				
		FEE BILLABLE TO DATE 85.0%		\$ 7,012.00		
		LESS FEE PREVIOUSLY BILLED		7,000.00		
		FEE BILLABLE		\$ 12.00		
TOTAL AMOUNT CLAIMED THIS VOUCHER						\$12.00
(Use continuation sheet(s) if necessary)			(Payee must NOT use the space below)		TOTAL	\$12.00
PAYMENT: <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL <input type="checkbox"/> PROGRESS <input type="checkbox"/> ADVANCE	APPROVED FOR = \$		EXCHANGE RATE = \$ 1.00		DIFFERENCES	
	BY ²		Amount verified; correct for		(Signature or initials)	
	TITLE		Amount verified; correct for		(Signature or initials)	
	TITLE		Amount verified; correct for		(Signature or initials)	
	TITLE		Amount verified; correct for		(Signature or initials)	
Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.						
(Date)		(Authorized Certifying Officer) ²			(Title)	
ACCOUNTING CLASSIFICATION (Appropriation symbol must be shown; other classification optional)						
PAID BY	CHECK NUMBER		ON TREASURER OF THE UNITED STATES		CHECK NUMBER	
	ON (Name of bank)		PAYEE ³		PER	
	CASH		DATE		TITLE	

¹ When stated in foreign currency, insert name of currency.

² If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.

³ When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

CUMULATIVE BILLING SUMMARY

Company: _____

Department: _____

Contract No. SES-W 115

Cumulative costs incurred claimed
thru 31 August 1964 \$ 92,659.25

Less: Contract reserves withheld \$ -0-

DD Forms 396 Outstanding \$ -0-

Costs billed thru previous
vouchers \$ 82,314.24 \$ 82,314.24

Net amount of cost claimed this
voucher \$ 10,345.01

Fixed fee payable (computation
below) \$ 12.00

Net amount claimed - Voucher # 5 & 6 \$ 10,357.01

Computation of Fixed Fee

Fixed Fee per contract \$ 8,250.00

Maximum payable \$ 7,012.00

Fixed Fee earned \$ 7,875.00

Less: Fee previously billed \$ 7,000.00

Fee withheld \$ 863.00 \$ 7,863.00

Net amount claimed - Voucher # 6 \$ 12.00

Contract Funding

Total amount of Contract and
Amendments (incl. Fee) \$ 105,250.00

Funding Received to date of
this voucher \$ 105,250.00